

Public Officer

rev 01/18
ORS 249.877

! Warning Supplying false information on this form may result in conviction of a felony with a fine of up to \$125,000 and/or prison for up to 5 years. This statement must be submitted no later than 5 days after the filing officer determines the recall petition contains sufficient signatures.

☐ State ☐ County for both county and district offices ☐ City

Name	Contact Phone
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Residence Address street, city, state, zip

Mailing Address if different	Email Address
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By signing this document I hereby certify that the information in the above statement of justification is true.

Public Officer's Signature

James H.

Date Signed

05/08/2023

For Office Use Only

Initials _____ Date and Time Stamped _____